



State of California
California Environmental Protection Agency
California Environmental Technology Certification Program



Application for Certification

This form should be completed only after the technology has been deemed eligible for entrance into the program.
Questions regarding this application should be directed to the individual identified at the end of this form.

1. ORGANIZATIONAL INFORMATION

This section to be completed by the California Environmental Protection Agency:

NAME _____

TITLE _____

COMPANY NAME _____

TECHNOLOGY NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____

COUNTRY _____ ZIP CODE _____

TELEPHONE _____ FAX _____

E-MAIL _____ WEB SITE _____

2. AGREEMENT

I understand that, after reviewing this application, California Environmental Protection Agency staff will meet with me to discuss the scope, timetable and cost of the certification evaluation. If I need to submit information that I consider confidential (proprietary/intellectual property/trade secrets), I understand that a confidentiality agreement should first be established. I understand that this is a fee-for-service program and that I will be expected to reimburse the State for all costs associated with the evaluation of my technology. An application fee, in the amount of \$_____, is enclosed for cost associated with application review by _____. Payment of application fees is required before application review can begin.

Signature: _____

Name (please print or type): _____

Title: _____ Date: _____

Telephone: _____ E-mail: _____

Address: _____

3. SCIENTIFIC AND ENGINEERING PRINCIPLES

Certified technologies must be based on sound scientific and engineering principles. This determination will be made after review of literature, an evaluation by technical experts, and examination of the supporting information.

Please check and attach any documents that describe the underlying principles, and scientific and engineering basis of the technology.

- ☐ Textbook references, technical handbooks, journal articles, or other references that have acceptance in the professional community
- ☐ Patented or patent pending
- ☐ Product Development Record (This includes in-house validation data.)
- ☐ Other (Please describe) _____

4. PERFORMANCE CLAIM

Please check the items that are attached. Submission of all items is required.

- ☐ **Performance Claim(s) to Be Certified.**
Attach a description of each technology performance claim you wish certified. The claim must meet the criteria specified in "Guidelines for Specifying Claims".
- ☐ **Data to Support Each Performance Claim.**
Please submit all existing, independently verified data. Complete data sets must be provided. The supporting data must meet the requirements specified in "Data Quality Requirements".

We will contact you after reviewing the submitted data. If additional testing is required, we need to approve of the test plan before the data are collected to insure that it fulfills the requirements in Appendix II.

5. REQUIRED DOCUMENTS

Please check the items that are attached. Submission of all items is required unless other arrangements have been made.

- ☐ **Design.** Please provide a process flow diagram and a brief summary of design drawing, equipment specification sheets and other information that you have available which identifies the processes or specific steps by which the technology operates.
- ☐ **Mass Balance.** This includes input, outputs, emissions, discharges, and residuals. Identify resource usage, including water and energy.
- ☐ **Range of Operating Conditions.** Conditions over which the technology can operate and still meet performance claims.
- ☐ **Permits.** Please include copies of any local, state, or federal government permits or authorizations obtained or required to operate or sell this product. If multiple permits have been issued, include a sample of each type of permit issued or requested.
- ☐ **Other Certifications.** Please provide copies of any certifications or verifications granted to the technology. Include any supplemental information that will help us understand the scope of the certification or verification.

- ☐ **Health and Safety.**
 - ☐ **Worker Safety Issues.** Please attach a summary of the key health and safety issues associated with the use of the technology. Provide an assessment of hazards and risks, and a response plan for a potential malfunction, spill or any other problem that can affect worker health and safety.
 - ☐ **Operator Requirements.** Attach a summary of education, training, experience, and any licenses required to operate the technology.
 - ☐ **History of Accidents.** Include a listing and/or discussion of any accidents, dates and response procedures.
- ☐ **User Manuals.** This includes installation, maintenance, monitoring, operation, repair and replacement instructions; inspection, emergency and upset instructions; parts list; maintenance schedules; standard operational procedures; and quality assurance procedures.
- ☐ **Quality Management Practices.** Please submit a copy of the quality management procedures used in the manufacturing of the technology, and customer support services.
- ☐ **Warranties and/or Bonds.** Please identify any manufacturer warranties or guarantees.
- ☐ **Customer References.** Identify installations or applications that we can visit and evaluate. Provide a list of site locations and contact information (name, address, telephone number) for each.
- ☐ **Other** (Please specify): _____

- ☐ Is there documentation/data not included with this application that will be provided at a future date? If yes, please list the information that will be provided and include an estimate of when it will be furnished. If the information that is lacking is considered essential to the evaluation of the technology, your application may be considered incomplete and further processing may be delayed.
 - ☐ All required information is attached.
 - ☐ The following information will be provided at a future date. (Please specify)

Questions regarding technical aspects of this application should be directed to the project leader:

Name:
Title:
Agency:
Address:
Telephone Number:
Fax:
E-mail:

Return two copies of the completed form and all attachments to:

**California Environmental Protection Agency
California Environmental Technology Certification Program (CalCert)
P.O. Box 2815
Sacramento, CA 95812-2815**

